FEE TRANSMITTAL

Electronic Version v09

Stylesheet Version v08.0

Title of Invention

X-ray Tube Cathode Overvoltage Transient Supression Apparatus

Application Number:

Date:

First Named Applicant: Liang Tang

Attorney Docket Number: 137291-2 (GEMS 0218 PA)

TOTAL FEE AUTHORIZED \$ 918

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as large entity

BASIC FILING FEE

Fee Description	Fee Code	Amount \$	Fee Paid \$				
Utility Filing Fee	1001	790	790				
Subtotal For Basic Filing Fees: \$ 790							

EXTRA CLAIM FEES

Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$		
Total Claims : 20	0	1202	18	0		
Independent Claims : 4	1	1201	88	88		
Subtotal For Extra Claims Fees: \$ 8						

ASSIGNMENT FEES

Fee Description	Property Number	Quantity	Fee Code	Amount \$	Fee Paid \$		
Recording Each Patent	00000000	1	8021	40	40		
Assignment Per Property Fee							
Subtotal For Additional Fees: \$40							

AUTHORIZED BILLING INFORMATION

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number: 070845

Access Code ****

Deposit name: GE Medical Systems

Deposit authorized name: Jeffrey J. Chapp

Signature: /jeffrey.j.chapp/

Date (YYYYMMDD): 2004-10-13

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.